



## Citywide Aquatics & California Sports Center

## Help us serve you better. Please answer the following questions

Pool:	Operator: Class:		1	Γime	e:				
Are you a first	time customer of the	aquatics progran	n? Yes	or	No	•			
•	ear about the Program Other Website Flyer		Radio/TV	ad (	Othe	r:			
Excellent = 1 Very Good = 2 Average = 3 Needs Improv					/ement = 4			Not Applicable	
	ne registration process a	_	•		1	2	3	4	n/a 
2. Please rate the availability of services (times, location, frequency?)  Comments:					1	2	3	4	n/a 
3. Please rate the customer service you received at your pool.  Comments:					1	2	3	4	n/a
<b>4.</b> Please rate the quality of swim lesson instruction at your pool. Comments:					1	2	3	4	n/a
5. How well maintained is the facility you are attending?  Comments:					1	2	3	4	n/a
6. Please rate the level of safety provided at your pool site.  Comments:					1	2	3	4	n/a
7. How would you rate the overall program/service provided?  Comments:					1	2	3	4	n/a
3. Please rate the prices you paid for the services you received.  Comments:					1	2	3	4	n/a 
	Addit	ional Comments o	or Suggesti	ons:					
Thank you fo	r your time in completing	our survey. Your con	mments and s	uaaestic	ns a	re ve	rv im	portan	t to us.

Thank you for your time in completing our survey. Your comments and suggestions are very important to us To view this survey online go to www.sanjoseca.gov/prns/

